APPLICATION DATA SHEET

Application Information

Application Type::

Regular

Subject Matter::

Utility

CD-ROM or CD-R?::

None

Title:: IMPACT ABSORPTION STRUCTURE

Attorney Docket Number:: 1062-033 P1

Request for Early Publication?::

No

Request for Non-Publication?::

No

Suggested Drawings Figure::

Total Drawing Sheets:

6

Small Entity?::

No

Petition included?::

No

Secrecy Order in Parent Appl.?::

No

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

U.S.

Status::

Full Capacity

Given Name::

Myron

Middle Name::

John

Family Name::

Maurer

Name Suffix::

City of Residence::

Lake Orion

State or Province of Residence:: Michigan

Country of Residence::

U.S.

Street of mailing address::

3125 Hidden Timber Drive

City of mailing address::

Lake Orion

State or Province of

mailing address::

Michigan

Postal or Zip Code of

mailing address::

48359

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Italian

Status::

Full Capacity

Given Name::

Eugenio

Middle Name::

Family Name::

Toccalino

Name Suffix::

City of Residence::

Schwalbach

State or Province of Residence::

Country of Residence::

Germany

Street of mailing address::

Schuetzenstrasse 3

City of mailing address::

Schwalbach

State or Province of

mailing address::

Germany

Postal or Zip Code of

mailing address::

D-65824

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

U.S.

Status::

Full Capacity

Given Name::

Gavin

Middle Name::

Douglas

Family Name::

Vogel

Name Suffix::

City of Residence::

Lake Orion

State or Province of Residence::

Michigan

Country of Residence::

U.S.

Street of mailing address::

2915 Brookside, Apt. 307

City of mailing address::

Lake Orion

State or Province of

mailing address::

Michigan

Postal or Zip Code of

mailing address::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Indian

Status:: Full Capacity

Given Name:: Laxman

Middle Name:: Prabhakar

Family Name:: Katakkar

Name Suffix::

City of Residence:: Pune

State or Province of Residence: Maharashtra

Country of Residence:: India

Street of mailing address:: Suprabha, 2163-B-11/6, Sadashiv

48360

City of mailing address:: Pune

State or Province of

mailing address:: Maharashtra

Postal or Zip Code of

mailing address:: 411030

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country::

Status:: Full Capacity

Given Name:: Prashant

Middle Name:: Sharad

Family Name:: Shembekar

Name Suffix::

City of Residence:: Nagpur

State or Province of Residence: Maharashtra

Country of Residence:: India

Street of mailing address:: Plot 79, Vyankatesh Apartment, Abhyankar Nagar

City of mailing address::

State or Province of

mailing address:: Maharashtra

Nagpur

Postal or Zip Code of

mailing address:: 440010

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Indian

Status:: Full Capacity

Given Name:: Srinivasan

Middle Name::

Family Name:: Velusamy

Name Suffix::

City of Residence:: Erode

State or Province of Residence:: TamilNadu

Country of Residence:: India

Street of mailing address:: 64, V.O.C. Street, Kollampalayam

City of mailing address:: Erode

State or Province of

mailing address:: TamilNadu

Postal or Zip Code of

mailing address:: 638002

Correspondence Information

Correspondence Customer

Number:: 25215

Name: Christopher J. Voci

Street of mailing address:: 401 South Old Woodward Avenue, Suite 311

City of mailing address:: Birmingham

State or Province of mailing address:: Michigan

Postal or Zip Code of mailing address: 48009

Phone number::

248-593-9900

Fax Number:: 248-593-0581

E-Mail address:: cvoci@patentco.com

Representative Information

| Representative Customer Number:: | 25215 | 1 |
|----------------------------------|-------|---|
| | | ı |

Assignee Information

Assignee name::

Dow Global Technologies, Inc.

Street of mailing address::

Washington Street, 1790 Building

City of mailing address::

Midland

State or Province of mailing address::

Country of mailing address::

MΙ

Postal or Zip Code of mailing address:: 48674